

5. Foreign corporation: Enter principal office address

2. Name of Corporation

6. Brief Description of the character of the affairs which are actually conducted in Rhode Island

The Holy Ghost School

1. Corporate 1D No.

3. State of Incorporation RHODE ISLAND

141750

Matthew A. Brown, Secretary of State Corporations Division 148 W. River Street, Providence, RI 02904-2615 401.222.3040

NON-PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2005 Filing Period: June 1 - June 30 • Filing Fee: \$20.00 *

OPERATING A PRIMARY AND SECONDARY SCHOOL WITH GRADES KINDERGARTEN THROUGH TWELVE

* In accordance with R.L.G.L. 7-6-94, each corporation failing or refusing to file its annual report within the time prescribed by law (R.I.G.L. 7-6-91) is subject to a penalty fee of \$25.00.

7. NAMES AND ADDRESSES OF THE OFFICERS ("X" BOX FOR ATTACHMENT) [FILE. IN SPACES BEFORE USING ATTACHMENTS

4. Corporate address in Rhode Island Street Address

312 ARBS HED & Poulding Prov.

State

State

President Name Most Reverend Thomas J. Tobin			Vice President Name		
Sireet Address			Rev. Msgr. William I. Varsanyi Street Address		
One Cathedral Square			One Cathedral Square		
City	State	Zip	City	State	Zip
Providence	RI	02903	Providence	RI	02903
Secretary Name		02903	Treasurer Name	Α.Σ	02303
Rev. Msgr. John J. Darcy			Most Reverend Thomas J. Tobin		
Street Address			Street Address		
One Cathedral Square			One Cathedral Square		
City	State	Zip	City	State	Zip
Providence	RI	02903	Providence	RI	02903
8. NAMES AND ADDRESS THE NUMBER OF DR	ES OF THE DIRECT	ORS ("X" BOX FOR ATT		PACES BEFORE USING A	TTACHMENTS
Director Name			Director Name		
Most Reverend Thomas J. Tobin			Rev. Msgr. William I. Varsanyi		
Street Address			Street Address		
One Cathedral Square			One Cathedral So	miare	
City	State	Zip	City	State	Zip
Providence	RI	02903	Providence	RI	02903
Director Name			Director Name	•••	
Rev. Msgr. John J.	Darcy		mane		
Street Address			Street Address		
One Cathedral Square					
City	State	Zip	City	State	Zip
Providence	RI	02903			
9. REGISTERED AGENT II Agent Name	N RHODE ISLAND -	DO NOT ALTER- Chang	ges require filing of	Form 641 -R.I.GL 7-6-1	3 / 7-6-78
William T. Murphy					
Address			City	710	
		•			
312 Turks Head Building			Providence 02903		
This report must be signed	hy either the Pres	ident, Vice President,	Secretary, Assistant Se	ecretary, Treasurer, Ro	ceiver or Trustee
		FILED			
1 4 1	7 3 U	3 1 1 1 1 1 1 1 1 1 1		jury, I declare and affirm th	
141750 DNP 03/21/06	05:26:59 PM] APR 0 1 2000		any accompanying schedu ts contained herein are true	
File Date		34 Ja	and i	X	3/22/06
		Pi	Signature of Officer	July D	ale
Check No		95132		John J. Darcy	
B <u>y:</u>			Print or Type Name of C	IJjnc er	
FOR SECRETARY OF STATE (JSE ONLY		Secretary	· · · · · · · · · · · · · · · · · · ·	
L <u> </u>		J	Title of Officer		Form 631 Rev. 12/0.